

Okay, Well How about Applied Liberal Education? Making a case for the Humanities through Medical Education

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Abstract

Often, the defense of the humanities in universities rests upon the benefits that they confer on society. The stakes for such a case are especially high given recent austerity processes underway, post-economic crisis. However, I argue that an emphasis on social benefits risks undermining the educational value of the humanities. I also claim, somewhat paradoxically, that the worth of the humanities has a certain kind of applicability or potential that can recommend itself to a variety of places in the university. Such an argument does not make a direct case for the humanities as distinct academic fields. However, by showing how liberal education is integral to education in professions that serve the public good, such as medicine, I aim to show that the humanities can play a crucial educational role. Accordingly, the humanities should be supported for salient educational reasons of public value or merit.

The Crisis of the Humanities

Once upon a time, a solid grounding in the humanities was considered to be an essential component of what it means to be educated. This perspective benefited from a rare consensus between the philosophy of higher education and the public's sense of the role and purpose of the university. This might sound like revisionist history, but I use the term "consensus" in a relative sense. No doubt the humanities have always faced some kind of scrutiny from those inside and out of the academy. In fact, liberal education has been subject to ongoing debates about the influence of the marketplace and its role in preparing future generations.¹ However, it seems clear that the humanities, and the liberal education that served it, was generally thought to deserve a special place in a person's educational life. So long as the humanities were granted this special place, universities were largely free to offer a liberal education on the terms that they saw fit.

This arrangement is clearly over. On the one hand, the situation of the humanities has had a particularly rough time over the past few decades. We've seen a number of admirable defenses of liberal education in response.² But the trend has crossed a threshold. An entrenched economic crisis seems to have been the final straw for a society that has written the vision of education in primarily economic terms. For the humanities, this serves as a kind of double humiliation. First, education's agenda was "broadly" defined as an engine to economic growth and social mobility. Liberal education is not well-suited to such aims. But as long as governments were able to provide funding, and universities were able to maintain enrolment numbers, the humanities could be supported as a kind of luxury or as a signifier of tradition and prestige. However, recent developments in higher education seem to indicate that the

humanities cannot be supported even as an indulgence. Government shortfalls in university funding have so far shown that the humanities, and the model of liberal education that relies on them, will be the first to go.

For those working in the humanities, the short-sightedness of this approach is obvious. But this only seems obvious because their ongoing initiation into those values that make the reasons for preserving humanistic liberal education self-evident. These reasons are not so evident for policy-makers struggling to keep shrinking budgets in check. This poses certain justificatory challenges in defending the existence of the humanities in the university.

We might be to try and show that the humanities confer measurable benefits to society. We could make the case that arts students are more employable than business students. Or maybe that philosophy can be used to develop effective social policy. Such a strategy is short sighted and sells the humanities short. Stanley Fish, for example, has recently argued that we should reject a justificatory structure that relies on pointing out the short-term benefits for the community at large. Accepting the structure only serves as a tacit admission of guilt to the charge that the humanities are not pulling their weight. At the worst, if the arguments for short-term benefits turn out to be inconclusive or unsound, the humanities have no recourse but to admit defeat, having legitimated the structure. Fish summarizes the appropriate approach, as he sees it, as follows:

When it comes to justifying the humanities, the wrong questions are what benefits do you provide for society (I'm not denying there are some) and are you cost-effective. The right question is how do you...fit into what we are supposed to be doing as a university. "As a university" is the key phrase, for it recognizes the university as an integral unity with its own history, projects and goals; goals that at times intersect with the more general goals of the culture at large, and at times don't; but whether they do or don't shouldn't be the basis of deciding whether a program deserves a place in the university.³

Rather than play the game of economics, a game the humanities cannot win, universities should educate decision-makers on the role and purpose of the university. Such an approach is more honest, even if it is no more likely to be effective than any other.

Fish's advice may not turn out to be good strategy. But it moves the argument a step forward by making a crucial distinction between the benefits of the humanities as academic fields of study and the benefits of participation in humanistic activities such as poetry reading or philosophizing. Too often, the justification of the humanities conflates the former with the latter. Academics value the opportunity to undertake sustained scholarly inquiry about the textual consistency of Kant's moral theory or Ovid's influence on modern literature. But such investigations may have no immediate benefits to the community and its undertaking is not quite the same as getting enjoyment from reading Ovid or reflecting on the one's own moral life from reading Kant. There is a serious

error is in trying to justify the academic value of the humanities by forcing it into an instrumental framework. If we want to continue the humanistic tradition in the former sense, we need to develop a clear account of the value of the humanities as academic disciplines within a university first and foremost.

I will leave this argument as it stands. It seeks to take a perceived weakness (the lack of “relevance” in liberal education) and aims to show how this perception is informed more by as much a failure to understand the role and purpose of the university as anything else. But I also think that it is incomplete. In stressing the importance of remaining unapologetic about the academic value of the humanities, and in trying, understandably, to maintain the integrity of the internal values of the university, the argument passes over the educational value of a humanistic liberal education. Philosophers of education are well aware of such arguments though the works of R.S. Peters and Paul Hirst, among others. Like academic values, the educational values proffered by liberal education may not be hard pressed to justify themselves on today’s economic stage. But neither must it mischaracterize itself as a process that offers little to its students other than an opportunity to briefly in what academics value about their work.

In the traditional story of liberal education, the humanities offer an initiation into forms of knowledge and understanding that are of intrinsic worth or value. Such worth is not directed to particular ends, nor is it restricted to a specific intellectual caste. It is something that is of value to humankind. Now the question is this: can liberal education conceived in this way continue under such trying circumstances? After all, it is the unusual nature of the intrinsic worth argument that makes it difficult to demonstrate to those outside of the academy – because it is supposed to be dissociated from particular practical concerns we can’t really demonstrate its value by showing how it can further economic aims or policy goals. This suggests rough going for liberal education into the future.

Medical Education in the Humanities

Medical education in North America has an interesting relationship with the universities. In the late 19th century, most schools of medicine were fairly unregulated. However, the modern medicine we see today has largely been shaped and influenced by the publication of Abraham Flexner’s report on medical education. “The Flexner Report” resulted in nothing less than a wholesale dismantling and reconstruction of medical education into the regulated and standardized form seen today in Canada and the United States.⁴ The report exerted a cultural, as well as institutional, influence: Flexner’s report firmly established the professional identity of physicians as experts in modern sciences and a conception of medical practice as a technical discipline.⁵ This conception was once seen as an orthodox educational ideal.

Clearly, such a conception was not value - neutral and reflects a particular set of assumptions about the nature of medical work and its basic aims. This has led to significant challenges as medical practice makes the transition to the 21st century.

Physicians increasingly face complex questions regarding patient well-being and professional obligations. Accordingly, professional bodies such as the Carnegie Foundation have called for a more progressive focus in medical education, acknowledging that training focused on scientific knowledge is insufficient in this respect.⁶

These challenges require a more substantive approach than developing decision-making skills. In fact, medical education has also struggled with an overall focus on the patient as a person as opposed to an object of medical study. Consider the example of the ethics of patient communication. Mishler's landmark study of patient-doctor communication revealed systemic, dehumanizing communicative interaction between patient and doctor.⁷ Adopting Habermas' theory of communicative action as an analytic framework, Mishler studied communicative interactions between patient and doctor and discovered that they were consistently characterized by a refusal to acknowledge the lived experiences of the patient. Consider the following recorded interaction. In this incident, the doctor is assessing the patient's stomach complaints:

Doctor: How, how soon after you eat it?

Patient: Well...probably an hour...maybe less -

Doctor: About an hour?

Patient: Maybe less...I've cheated and I've been drinking which I shouldn't have done -

Doctor: Does drinking make it worse?

Patient: [I drink] enough to make me go to sleep at night...

Doctor: One or two drinks a day?

The interaction seems typical. However, the significance and meaning of patient's statements about "drinking to sleep" and "drinking which I shouldn't have done" play a particular role in her life, health and well-being. These statements, which reflect significantly on the patient's quality of life, are ignored by the physician and are reduced to diagnostic information such as "how many drinks per day?" The "context-stripping" and abstracting standards of the biomedical approach orient the direction of physician's questions and the interpretation of reported problems.⁸ According to Mishler, the biomedical and technocratic "voice of medicine" undermines and distorts mutual dialogue and human interaction. As a consequence, the humane dimension of medical practice is severely compromised.⁹

Misher's study and subsequent challenge to medical schools to prepare future physicians for more humane interaction has inspired much work in doctor-patient communication.¹⁰ His and similar work has led to a general shift in emphasis on the

critical role played by the humanities in broadening the professional formation of doctors.^{11 12} One of the central objectives of this shift is to expand the professional identity of physicians beyond technical apprenticeship and to “humanize” medical practice via engagement with the ideals of liberal education.

Despite the spirit of this reform, there appears to be little philosophical reflection in contemporary medical literature on the conceptual linkages between liberal education, on the one hand, and medical educational scholarship, on the other. As a consequence, attempts at implementing a humanistic conception of medical education is often distorted due to a misunderstanding of the educational ends and appropriate means of humanistic and liberal education.¹³ Despite Mishler’s challenge, for example, education in communication is predominantly treated as a mere means to a more accurate or clinically sound diagnosis and not as a way of addressing patient needs within a broader context of well-being. On this view, the patient remains a strictly scientific object of clinical study.¹⁴ While medical education may require a humanistic perspective, such an aim is consistently undermined by a model of training that remains dominant, evinced by a consistent failure to appropriately develop the relationship between liberal education and medical education.^{15 16} I argue that it is within this relationship that we can develop an account of the humanities that may have an important role in our current educational context. If the historians are right and liberal education often finds itself having to renegotiate its place in the larger community, perhaps this move is another stage in the negotiation.

Applied Liberal Education

Here I want to make a case for what would best be called applied liberal education. Applied liberal education is, as I see it, an education that integrates the aims, value and pedagogy of liberal education in a way that helps fully realize the humanistic dimensions of more specialist professions such as medicine. It is “applied” insofar as it offers resources and perspectives that are lacking in and can address problems that seem intractable to professional education.

Applied liberal education is best characterized by contrasting it with how liberal education is usually adopted in medical education, and moving on from there. The humanities in medical education are at present guided by an unreconstructed Oakeshottian version of initiation. The fault does not lie with Oakeshott. Rather, medical education misappropriates the initiation ideal in ways that leave medical students viewing the humanities as ineffectual and indulgent.

On this model, medical students are exposed to forms of thought such as philosophy and literature as distinct and disconnected academic disciplines. The idea is that students ought to, along with physiology and immunology, master humanistic bodies of knowledge such as ethics and apply them in medical practice. In medical ethics education, for example, students are required to develop an understanding of what Moreno calls the “bioethics mantra”: autonomy, beneficence, non-maleficence and

justice.¹⁷ Once students learn how to apply these principles to particular medical cases, their humanistic education in ethics is largely complete.

William Stempsey characterizes this approach as a “quarantine” of humanistic disciplines that undermines their educational value.¹⁸ This model lies closer to Fish’s account of the humanities as fields of academic study that transmit internal intellectual standards. This model may be good for justifying the humanities as a research enterprise in Faculties of Medicine, but medical education is mistaken in thinking that academic values make for good educational values, and that these values in turn make for good professional practitioners. Stempsey characterizes the mistake in the following terms:

Philosophy, theoretical ethics, history, and literary studies are not liberal arts in this sense, but humanities. Those of us who work in these fields see them as academic disciplines, with canonical works and bodies of knowledge that constitute the discipline. We want our medical students to acquire the liberal arts, and not necessarily to become experts in the particular disciplines of the humanities. However, humanities are often taught as ends in themselves and not as vehicles for the liberal arts. When this is done, the connection between the liberal arts and the humanities is easily lost.¹⁹

At the other extreme, when literature is taught in medical schools it is often used as a means of transmitting medical “rules” or lines of practice.²⁰ The misdirection of initiation into academic values or technical knowledge only serves to reinforce a model of medical education that is itself defined by a dominant biomedical culture.

Applied liberal education, on the other hand, emphasizes that the humanities are a way of disclosing the moral and ethical dimensions of professional practices such as medicine. In the Oakshottian tradition, liberal education initiates pupils into “an intellectual, imaginative, moral and emotional inheritance”, engagement with which promotes self-knowledge and understanding of the human condition.²¹ If a general liberal education involves an initiation into these humanistic values as we understand them in our daily lives, applied liberal education simply seeks to promote an understanding of these values as they play out in specific contexts of professional practice. Taking the time to counsel a bereaved family member, explaining a difficult diagnosis, helping a parent make a complex decision that will have long-term consequences for their child – such moments require an inheritance of human meanings, values and beliefs if they are to be realized appropriately in medical practice. This inheritance is by no means a side-concern to the business of medical work. Differential diagnoses require dialectical thinking; history-taking demands a sense of narrative.²² And while these situations clearly require a sound knowledge and understanding of biomedical principles, physicians that exercise these capacities in a moral vacuum cannot carry out their work. Therefore, the humanities can and should have substantive and seamless integration with medical education. This will involve translation – ensuring that the meaning and values of the humanistic tradition are

disclosed in the activity medical practice itself, not imposed on medical practice as if they were some foreign body. For example, liberal education's literary tradition facilitates our ability to place ourselves in the lives of others. Dickens, to use the common example, helps us to understand the struggles of poverty. In an applied liberal education focused on medical education, the literary tradition can help disclose moral dilemmas as they play out in medical contexts, emphasizing the patient's experience as these dilemmas play out. Vincent Lamb's *Bloodletting and Miraculous Cures*,²³ about the struggles of medical students practicing in a Toronto hospital, is one example. Through the philosophical tradition, future physicians can become aware of the complexity that these dilemmas take on in the clinical setting. To extend Stempsey's analogy, this means neither treating the humanities as something to be quarantined, nor as a curative. Rather, a classical humanities education is vital to the life of medical practice.

Applied Liberal Education: Applied but not Instrumental

In order for an applied liberal education to be a viable philosophical project, I have a certain view of professional practice in mind. I believe that moral professions such as medicine, teaching and social work are essential in delivering primary social goods such as health, education and social support. These professions are fundamentally moral in character by virtue of the essential role that they play. The activities of these professions are not simply regulated by moral principles; rather, they are defined by them. An applied liberal education is essential in making this moral dimension salient. Goods that were once delivered by non-specialist citizens in the larger community (think, for example, of the role that the neighbor once played in providing social support with the relative anonymity of urban life today) are increasingly relying on these professions for their delivery. As society undergoes increasing specialization and division of moral labor, the general liberal education that once played a key role in helping to disclose the value entailed by the humane care and support of others must be supplemented by an applied liberal education that can help professionals realize these values in their specialized moral task. In higher education we have been very good at ensuring that our technical, scientific and economic principles have been contextualized for professionals as a way of dealing with the pronounced differentiation of modern society. We have not been so good at adapting humanistic values for such specialized roles.

Applied liberal education might be thought to be a contradiction in terms. If a defining feature of liberal education is that it is not directed to particular ends, how is applied liberal education not simply a watered-down, instrumentalist take on the humanities? Consider R.S. Peters' claim that liberal education can be legitimately extended to the professional preparation of teachers:

[Liberal education] usually suggests the refusal to harness disciplines to any practical or utilitarian ends; the determination to explore them for their own sake and to pursue paths intimated by what is internal to the disciplines themselves. But, I would suggest, it could also be extended so

that one could describe a vocational training as liberally or illiberally conceived and implemented... In the case of education and politics there is a further reason why disciplines must be presented in this liberal way; for neither education nor politics are useful arts or branches of technology in any straightforward sense in the way in which some might claim that medicine and engineering are.²⁴

For Peters, liberal education can only be extended to the professions if they meeting something like a “liberal arts” criterion. Education incorporates many various and complex ethical, aesthetic, and psychological questions that cannot be reduced to specifiable, technical aims. Medicine is presumably different in this respect. It fails the liberal arts test.

There are at least two ways to respond to this critique. I will offer them for areas of further focus for developing a relationship between philosophy of education and medical education. This is a relationship that medical education could surely benefit from, and from which a persuasive case for a modern liberal education could be defended in an educational era marked by increasing pressure on the humanities.

First, I think it is clear from that Peters’ exclusion of medicine from the liberal arts is mistaken. A conception of medical practice reduced to a determinate aim such as “life-extension” is far from sufficient. The fact that such a conception may have taken on a life of its own in our hospitals is not something to be celebrated, just as we should not celebrate a conception of teaching as promoting high test scores. I believe Peters’ dismissal of medicine is more a consequence of the ascendance of a Flexnerian ideal of medical practice in the public mind. As we have seen, such an ideal fails to grasp the humanistic core of medical practice. The persistence of such an ideal is understandable. Whereas teacher education had influential advocates such as Peters, Hirst and others to keep the ideal of education as a moral practice alive, medical education has had few such historical analogues.

Second, I think that we need to look more closely at the relationship between liberal education, professional education and modern life. True, these were questions that preoccupied earlier writers on liberal education. But modernization has only intensified these questions. Mulcahy asks, “What does it mean to be an educated person in the 21st century?”²⁵ He suggests that we reframe liberal education in terms of modern life, but not in an instrumental or goal directed sense.²⁶

[A] particular feature of liberal education...is its capacity to prepare students for dealing with the persistent and common demands of living...many aspects of work have a lasting quality, are common to various forms of work, and may be encountered by most people in the course of a working life. It is these aspects of work that become the main focus of attention...not the particular requirements of specialized forms of work, such as may be found in a particular job.²⁷

Like Peters, I think that Mulcahy is perhaps focused too sharply on the technical aspects of professions. In the education of that I have called “moral professions”, such as medicine, we need to prepare individuals for the role they will play in promoting public goods such as health care and social support. While humanistic values may play a role in preparing people for life generally, there is an acknowledged intensification of these values in such professional contexts. In other words, we have to do a better job of preparing our students for life as moral professionals. This will require specialized technical knowledge as well as a naturalized understanding of how those values play out in practice. Physicians may know that we ought to recognize and value the unique experiences of others in our everyday interactions. But how is this insight translated into a medical context where diagnostic thinking requires that we abstract from the particulars to some degree? Taken in this sense, applied liberal education may have a positive educational influence for both individuals and the community. However, this influence is not directed to specific instrumental ends in the sense that Peters and Mulcahy have in mind. It is a proper understanding of the intrinsic human value of moral professions in modern life.

Conclusion

I have tried to develop a preliminary account of liberal education that can stake out a continued role for the humanities in trying educational times. It lacks the contrarian gesture that Stanley Fish has in mind. Nor does it map out any particular strategic or economic aim likely to catch the attention of university funders. However, even if our educational fortunes turn around and the humanities fall back into favor, I believe that the case for applied liberal education identifies an important dimension of professional education that must be addressed if the humanities are to continue to play an important educational role in modern life.

¹ Axelrod, Paul. *Values in Conflict: The University, the marketplace and the Trials of Liberal Education* (London: Queen' University Press, 2002)

² See, for example, Arcialla, Renee, *For the Love of Perfection: Richard Rorty and Liberal Education* (New York: Routledge, 1995); Nussbaum, Martha, *Cultivating humanity: a classical defense of reform in liberal education* (Harvard: Harvard University Press, 1997).

³ Fish, Stanley. "Crisis of the Humanities II". (New York Times) Accessed Oct 2, 2010
<http://opinionator.blogs.nytimes.com/category/stanley-fish/>

⁴ Hudson, Robert P. "Abraham Flexner in Historical Perspective." In *Beyond Flexner: Medical Education in the Twentieth Century*. Ed. Barbara Barzansky and Norman Gevitz. (New York: Greenburg Press, 1992).

⁵ Barbara Hudson, Robert P. (1992). "The Growth and Divergence of the Basic Sciences." In *Beyond Flexner: Medical Education in the Twentieth Century*. Ed. Barbara Barzansky and Norman Gevitz. (New York: Greenburg Press, 1992).

⁶ Irby et al. "Calls for Reform of Medical Education by the Carnegie Foundation for the Advancement of Teaching: 1910 and 2010." *Academic Medicine* (85)2 (2010): 220-227.

⁷ Mishler, Eliot G. *The Discourse of Medicine: Dialectic of Medical Interviews* (New Jersey: Ablex Publishing, 1984).

⁸ Ibid, 164.

⁹ Ibid, 127.

¹⁰ Barry et al. "Giving voice to the lifeworld, More humane, more effective medical care? A qualitative study of doctor-patient communication in general practice." *Social Science and Medicine* 53 (2010): 487-50.

¹¹ Foss, L. "The Challenge to Biomedicine: A Foundations Perspective." *Journal of Medicine and Philosophy* 14 (1989): 165-191.

¹² McManus, I.S. "Humanity and the Medical Humanities." *The Lancet* 346 (1995): 1143-1145.

¹³ Arnold et al. "The Humanities, Humanistic Behavior, and the Humane Physician: A Cautionary Note." *Ann Intern Med.* 106 (1987): 313-318.

¹⁴ Walset, Levia and Schei, Edvin (2010). "Effecting Change through Dialogue: Habermas' theory of communicative action as a tool in medical lifestyle intervention." *Medical Health Care and Philosophy* (13) Early View (Available Online, <http://www.springerlink.com/content/11v9j86813743r38/>)

¹⁵ Buchanan, David R. "A new ethic for Health Promotion: Reflections on a Philosophy of Health Education for the 21st Century." *Health and Behaviour* 33 (2006): 290-304.

¹⁶ Kidd, M.G and Connor, J.T.H. "Striving to do Good Things: Teaching Humanities in Canadian Medical Schools" *Journal of Medical Humanities* 29 (2008): 45-54.

¹⁷ Moreno, Jonathan. *Deciding Together: Bioethics and Moral Consensus* (Oxford, Oxford University Press) p. 20.

¹⁸ Stempsey, William. "The quarantine of philosophy in medical education: Why teaching the humanities may not produce humane physicians." *Medicine, Health Care and Philosophy* 2 (1999): 3-9.

¹⁹ Ibid, 6.

²⁰ Evans, Donald (2009). "Imagination and Medical Education." *Values in Medicine What Are We Really Doing to Our Patients?* (London: Routledge, 1999).

²¹ Miller, Alistair. "Rhetoric, Paideia and the Old Idea of a Liberal Education." *Journal of Philosophy of Education* 41(2) (2007): 183-206.

²² Pellegrino, Edmund. "The humanities in medical education; Entering the post-evangelical era', *Theoretical Medicine* 5 (1984): 253-266.

²³ Lamb, Vincent (Canada, Anchor Canada, 2005).

²⁴ Peters. R.S. "The Place of Philosophy in the Training of Teachers." *Paedagogica Europaea*, Vol. 3 (1967): 152-166.

²⁵ D.G Mulchahy. *The Educated Person: Toward a New Paradigm for Liberal Education* (New York: Rowman and Littlefield, 2008) 150.

²⁶ Ibid, 151.

²⁷ Ibid, 162.